

LEAD-BASED PAINT CONTRACTOR LICENSE APPLICATION

NORTH DAKOTA DEPARTMENT OF ENVIRONMENTAL QUALITY DIVISION OF WASTE MANAGEMENT SFN 53477 (3-2019)

Application Requirements

1.	A check or money order payable to the North Dakota Department of Environmental Quality in the amount of \$450.00.				uality in	For Office Use Only Do not write in this space
2.	Send application to:	Division of Waste Man 918 E Divide Avenue,				Check No Check Amount Received Reviewer Date Approved License No
Name of Business				Contact Person		
Address			City			
State		ZIP Code			Telephor	ne Number
3. Business Information:						
Has this business ever had a ND Lead-based Paint Contractor License?						
Has this business ever had any Lead-based Paint license application denied; or any Lead-based Paint license suspended or revoked by a state, federal, or local government agency? No Yes, if yes, attach additional sheets explaining the situation.						
If applicable, on additional sheets explain all Lead-based Paint related enforcement actions taken against your company by a state, federal, or local government agency during the past two years.						
Registration with the ND Secretary of State is required before a ND Lead-based Paint Contractor License can be issued. Is this business registered with the ND Secretary of State? Yes, ID#						
If your business performs Lead-based Paint removal, a ND General Contractor License is required before a ND Lead-based Paint Contractor License can be issued. If applicable, what is your ND General Contractor License number? For information about the ND General Contractor License, contact the ND Secretary of State Licensing Div. at 701-328-3665.						
4. Services Performed by the Business:						
Check the appropriate service(s) your company provides and supply the name of one employee of the company certified in North Dakota to perform that service.						
_	ad-based Paint Removal udes repair, encapsulation & enclosure) Name of Supervisor					ate No. and Expiration Date
Le	Name of Inspector Lead-based Paint Inspection				Certificate No. and Expiration Date	
Le	ad-based Paint Risk Asses	Name of F	Risk Assess	sor	Certifica	ate No. and Expiration Date
Le	ad-based Paint Project Des	Name of F	Project Desi	igner	Certifica	ate No. and Expiration Date
5. Certification:						
The application must be signed by the owner, president, chairman of the board, or chief executive officer of the business. I certify that the information included with this application is true and accurate.						
Name (printed)			Title			
Signature			Date			